



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 9:14 am, Jul 09, 2014

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 097425	PRINTER SN 096.3580.866	DATE OF INSPECTION 07/03/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Troop F Headquarters		TIME OF INSPECTION 9:16 am

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

☒ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Guth Laboratories, Inc. LOT # 13290 EXP. DATE 10/29/2015

☒ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIMULATOR SN CD05457 SIMULATOR EXP DATE 06/03/2015

☒ CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 ➡ .098

TEST 2 ➡ .098

TEST 3 ➡ .099

☒ RFI DETECTOR OPERATING

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)**

REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

INSPECTING OFFICER

SIGNATURE

Trooper R.R. Dowd

PRINT NAME

Trooper R.R. Dowd

TYPE II PERMIT NUMBER/EXPIRATION DATE

240272 / 06-13-2016

TELEPHONE NUMBER

(573) 751-1000

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Boulevard
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **13290** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 31, 2013**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1202%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 29, 2015** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L \pm 3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:

Testing was conducted using Cerilliant Reference Standard lot number FN122211-02 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.

AS IV Serial no: 097425
Version no: 004C

TEST RECORD 00245

Temp Date Time 9/
210L

Air Blank:
07/03/14 09:17 .000
Calibration Check:
22 07/03/14 09:17 .098

Subject Name

TEST # 2

Subject I.D.

Operator Name, I.D.

TPROPER RR Dowd 932

Location

TROOP F HEADQUARTERS

AS IV Serial no: 097425
Version no: 004C

TEST RECORD 00244

Temp Date Time 9/
210L

Air Blank:
07/03/14 09:16 .000
Calibration Check:
21 07/03/14 09:16 .098

Subject Name

TEST # 1

Subject I.D.

Operator Name, I.D.

TPR RR Dowd 932

Location

TROOP F HEADQUARTERS

AS IV Serial no: 097425
Version no: 004C

TEST RECORD 00247

Temp Date Time 9/
210L

Void: RFI
12 07/03/14 09:20

Subject Name

RFI TEST

Subject I.D.

Operator Name, I.D.

TPROPER RR Dowd 932

Location

TROOP F HEADQUARTERS

AS IV Serial no: 097425
Version no: 004C

TEST RECORD 00246

Temp Date Time 9/
210L

Air Blank:
07/03/14 09:19 .000
Calibration Check:
23 07/03/14 09:19 .099

Subject Name

TEST # 3

Subject I.D.

Operator Name, I.D.

TPROPER RR Dowd 932

Location

TROOP F HEADQUARTERS



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

2

**PERMIT
TYPE II**

RICHARD R DOWD

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER, INTOX DMT, ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 6/13/2014

NUMBER 240272

EXPIRES 6/13/2016

MO 580-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)